

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P22309

1. Entity Name

CHECK PRINTERS, INC.

Principal Place of Business

Mailing Address

1530 ANTIOCH PIKE  
ANTIOCH TN 37013

1530 ANTIOCH PIKE  
ANTIOCH TN 37013

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

62-0403250

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ECKERT, ALFRED C III	
STREET ADDRESS	388 GREENWICH ST	
CITY-ST-ZIP	NEW YORK NY 10013	
TITLE	D	<input type="checkbox"/> Delete
NAME	INGLESBY, THOMAS V	
STREET ADDRESS	388 GREENWICH ST	
CITY-ST-ZIP	NEW YORK NY 10013	
TITLE	V	<input type="checkbox"/> Delete
NAME	CROW, JONA	
STREET ADDRESS	1530 ANTIOCH PIKE	
CITY-ST-ZIP	ANTIOCH TN 37013	
TITLE	V	<input type="checkbox"/> Delete
NAME	KINSER, CLARK W	
STREET ADDRESS	2709 BOULDER PARK COURT	
CITY-ST-ZIP	WINSTON SALEM NC 27106	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	BATTS, FRANCES	
STREET ADDRESS	1530 ANTIOCH PIKE	
CITY-ST-ZIP	ANTIOCH TN	
TITLE	DCEO	<input type="checkbox"/> Delete
NAME	KNIGHT, JAMES L	
STREET ADDRESS	1530 ANTIOCH PIKE	
CITY-ST-ZIP	ANTIOCH TN	

TITLE	EVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James L. Conde	
STREET ADDRESS	1530 Antioch Pike	
CITY-ST-ZIP	Antioch, TN	
TITLE	SVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael Willoughby	
STREET ADDRESS	1530 Antioch Pike	
CITY-ST-ZIP	Antioch, TN	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robyn Barbee	
STREET ADDRESS	1530 Antioch Pike	
CITY-ST-ZIP	Antioch, TN	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Garland C. Jenkins	
STREET ADDRESS	1530 Antioch Pike	
CITY-ST-ZIP	Antioch, TN	
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIKE MORMAN	
STREET ADDRESS	1530 ANTIOCH PIKE	
CITY-ST-ZIP	ANTIOCH, TN 37013	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Don Ehren	
STREET ADDRESS	2709 Boulder Park Court	
CITY-ST-ZIP	Winston-Salem, NC	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**Mar 19, 2001 8:00 am**  
**Secretary of State**

03-19-2001 90018 041 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)